

ACCESS TO CARE

Providers in Harford County that accept Medicaid / Sliding Fee Scale

In April 2006, a survey was conducted to determine the number of primary care providers in Harford County that accept Medicaid and/or a Sliding Fee Scale for uninsured patients. Providers surveyed include Internal Medicine, Family Practice, Pediatricians, and General Practitioners. What was not included in the survey is the “cap” that each provider places on the number of patients they will accept in each category. The following are the results of the survey:

Type of Provider	Total # in Sample	Accepts Medicaid		Offers a Sliding Fee Scale	
		#	%	#	%
Internal Medicine	52	19	37%	12	23%
Family Practice	30	6	20%	12	40%
Pediatricians	33	14	42%	8	24%
General Practitioner	5	3	60%	1	20%
TOTAL	120	42	35%	33	28%

Federal Qualified Health Center (FQHC) Initiative

Definition of an FQHC

- A type of provider defined by the Medicare and Medicaid statutes
- Receive grants under Section 330 of the Public Health Service Act
- Must be a public entity or a private non-profit
- Governed by a Board of Directors – 51% are active, registered clients of the health center
 - Ensures center is community based and responsive to the community's health care needs
- Must serve a designated Medically Underserved Area (MUA) or Medically Underserved Population (MUP)
 - Harford County was awarded an MUA designation in May 2008 for the following census tracts in Aberdeen: 3024.00, 3028.02, 3029.01, and 3029.02
- Must provide primary care services for all age groups
- Must provide the following services on site or by arrangement with another provider:
 - Preventive health services
 - Dental services
 - Mental health and substance abuse services
 - Transportation services necessary for adequate patient care
 - Hospital and specialty care
- Must use a sliding fee scale with discounts based on patient family size and income in accordance with federal poverty guidelines
- Must be open to all, regardless of their ability to pay

Benefits of being an FQHC

- Enhanced Medicare and Medicaid reimbursement
- Medical malpractice coverage through the Federal Tort Claims Act
- Eligibility to purchase prescription and non-prescription medications for outpatients at reduced cost through the 340B Drug Pricing Program
- Grant monies from Section 330 funds to offset cost of uncompensated care
- Access to physicians from the National Health Services Corps (NHSC); this program provides scholarships and loan repayment in exchange for services in a Health Physician Shortage Area (HPSA) / Medically Underserved Area (MUA)

Advantages of having an FQHC

- An FQHC must be open to all, regardless of their ability to pay – no financial guidelines
- **In 2007, more than 1/3 of FQHC patients were children and adolescents, making them a major source of pediatric health care and preventive services**
- Populations most affected by the services of an FQHC
 - Self-employed
 - People employed in firms of fewer than 100 workers and don't offer health insurance
 - Non-elderly people working part-time and people working full-time but for only part of the year that don't have health insurance i.e. construction, agricultural, tourist, etc.
 - Non-elderly people in families with incomes below 200% of the federal poverty level; and people living in families with incomes between 200% and 400% of the federal poverty level.
- FQHC must provide the following to help ensure access to basic health services as well as facilitate access to comprehensive health and social services
 - Case management services
 - Services to assist the health center's patients gain financial support for health and social services
 - Referrals to other providers of medical and health-related services including substance abuse and mental health services
 - Services that enable patients to access health center services such as outreach, transportation and interpretive services; and
 - Education of patients and the community regarding the availability and appropriate use of health services